

FIELD #	EPA FIELD NAME	FIELD DEFINITION	Field Size	Field Type	FIELD REQUIREMENT Required = R Conditional = C Optional = O
1	DASR Tracking #	Unique number assigned by the originator submitting the DASR (Direct Access Service Request). First 13 (9 + 4) digits are the originator's DUNs # followed by 9 user-specified digits. All future communication about this transaction will contain this tracking number.	22	C	C
2	Purchaser	Name of pending equipment owner. May be a Company name or an individual customer name	50	C	R
3	Date	The date the unsigned EPA is returned with intent to purchase or not to purchase	10	C	R
4	Duns # (if applicable)	Dun and Bradstreet corporate identifier	13	C	C
5	Billing Address	Address for submitting invoice	50	C	R
6,7,8	City, State, Zip	Billing address City, State and Zip	50	C	R
9	Contact Name	Person to speak with in regards to billing inquiries	50	C	R
10	Area Code/Phone Number	For Contact Person	13	C	R
11	E Mail Address	For Contact Person	30	C	C
	OPTION 1				
12	Purchase Existing Equipment located at:	Check off box if purchasing existing equipment located at the site	1	C	C
13	Customer Name	Name of the customer responsible for the account	50	C	C
14	Business Name	Business name of the account, if different from customer name	50	C	C
15	Service Address	Address of the metering site	50	C	C
16	Service City	City/Town/County in which the metering site is located	50	C	C
17	UNI – Universal Node ID	Unique permanent identification number assigned to each service delivery point of the UDC's distribution network	19	C	C
	OPTION 2				
18,19	Purchase: New Equipment or Supplies	Check box if new equipment or supplies are being purchased from UDC	1	C	C
20	Will Pick Up	Check box if new equipment or supplies will be picked up from designated UDC location	1	C	C
21	UDC will install (if applicable)	SRP/Cooperative Service area only – SRP or Cooperative is MSP and installing equipment	1	C	C
22	Company Name	Name of Company where equipment is to be shipped	50	C	C
23	Att:	Person who will be receiving equipment	50	C	C
24	Address	Ship to address	50	C	C
25	City, State, Zip	Ship to address city, state and zip	50	C	C
	EQUIPMENT DESCRIPTION				
26	Stock #	Warehouse item number	25	C	O
27	Equipment Type	Brief description of equipment	25	C	R
28	Equipment Number	Unique number assigned by the UDC (if applicable)	17	C	C

EPA DATA ELEMENTS

Sample – proposed changes for 11/29/00

TYPE: C = Character I = Integer

29	Equipment Serial Number	Serial number from face plate of equipment	10	C	C
FIELD #	EPA FIELD NAME	FIELD DEFINITION	Field Size	Field Type	FIELD REQUIREMENT Required = R Conditional = C Optional = O
30	Warranty Expiration Date	If applicable, the end date of any transferable manufacturer warranty.	10	C	C
31	Unit Price	Line item cost	8	I	R
32	Total Unit Price	This line will populate if intent to purchase equals yes	8	I	C
33	Intent to Purchase Y/N	Yes value indicates that line item will be purchased. Yes value will populate Total Unit Price column. No value indicates that line item will NOT be purchased and Total Unit Price column will populate zero dollars.	1	C	R
34	Sub Total	Sub total of line items with an intent to purchase value of Y	8	I	C
35	Sales Tax	Applicable sales tax for UDC service area	8	I	C
36	Grand Total	Total dollar amount owed for purchases for a specific site, new equipment or supplies.	8	I	C
37	Authorized Representative (printed)	Printed name of authorized person to purchase equipment	50	C	R
38	Signature	Signature of the person authorized to make this transaction		C	R
39	Title	Authorized person's title	50	C	R
40	Date	Date authorized person signs EPA	10	C	R
41	Seller	Company name selling equipment	50	C	R
42	Authorized Representative (printed)	Printed name of authorized person to sell equipment	50	C	R
43	Signature	Signature of person authorized to sell equipment	50	C	R
44	Title	Authorized person's title	50	C	R
45	Date	Date seller signs EPA	10	C	R